

## STATEMENT OF ECONOMIC INTERESTS

Date Initial Filing Received
Official Use Only

#### **COVER PAGE**

Please type or print in ink.

#### A PUBLIC DOCUMENT

NAME OF FILER (LAST)	(FIRST)		(MIDDLE)
Soe	May	Z	
1. Office, Agency, or Court			
Agency Name (Do not use acronyms)			
Natural Resources Agency			
Division, Board, Department, District, if applicable		Your Position	-
Department of Conservation-Division	of Oil,Gas&Geotherma	al Senior Oil & Gas Engineer	r (Supervisor)
▶ If filing for multiple positions, list below or on a	n attachment. (Do not use a	cronyms)	
Agency:		Position:	
2. Jurisdiction of Office (Check at least of	ne box)	:	
X State	•	☐ Judge or Court Commissioner (St	atewide Jurisdiction)
Multi-County		County of	·
City of		Other	
City of		Otrier	
3. Type of Statement (Check at least one b	oox)	,	
Annual: The period covered is January 1, 2 December 31, 2018.	018, through	Leaving Office: Date Left(Check one	
The period covered is/	_/, through	O The period covered is Janua -or- leaving office.	ry 1, 2018, through the date of
★ Assuming Office: Date assumed 04 / 0	09 , 2019	The period covered is the date of leaving office.	, through
Candidate: Date of Election	and office sought, if		
4. Schedule Summary (must complete Schedules attached	e) ► Total number of	f pages including this cover pa	ge:2
	_		
Schedule A-1 - Investments – schedule attached  Schedule C - Income, Loans, & Business Positions – schedule attached			
Schedule B - Real Property – schedule a	□ Schedule A-2 - Investments – schedule attached □ Schedule D - Income – Gifts – schedule attached □ Schedule B - Real Property – schedule attached □ Schedule E - Income – Gifts – Travel Payments – schedule attached		
		Silvado E moonio Silva Maron I	aymonia oonoado attaolica
-or- None - No reportable interests of	n any schedule		
5. Verification			
MAILING ADDRESS STREET (Business or Agency Address Recommended - Public Documer	CITY	STATE	ZIP CODE
801 K street	Sacramento	CA	95814
DAYTIME TELEPHONE NUMBER		MAIL ADDRESS	
( 916 ) 322-9766		nay.soe@conservation.ca.gov	and also the later of the later
I have used all reasonable diligence in preparing the herein and in any attached schedules is true and			nowledge the information contained
I certify under penalty of perjury under the lav	vs of the State of California	that the foregoing is true and correct	t.
Date Signed 07 - 19 - 19		(nay-soe	-
(month, day, year)	Sign	(File the originally signed paper sta	atement with your filing official.)

### **SCHEDULE A-1 Investments**

# Stocks, Bonds, and Other Interests (Ownership Interest is Less Than 10%)

Investments must be itemized. Do not attach brokerage or financial statements.

CALIFORNIA FORM 700 FAIR POLITICAL PRACTICES COMMISSION
Name

NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
Halliburton	Schlumberger
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
Energy Equipment and Services	Energy Equipment and Services
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 <b>X</b> \$10,001 - \$100,000	<b>×</b> \$2,000 - \$10,000
\$100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$1,000,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
X Stock Other	X Stock Other
(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	(Describe)  Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
	I I
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	► NAME OF BUSINESS ENTITY
OFNEDAL RECORDITION OF THIS BUSINESS	OFNERAL RECORDINATION OF THIS BUSINESS
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAIR MARKET VALUE	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000	\$2,000 - \$10,000
\$100,001 - \$1,000,000 S100,001 - \$1,000,000 Over \$1,000,000	\$100,001 - \$10,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other(Describe)	Stock Other(Describe)
Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C)
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
/ / 18 / / 18	/ / 18 / / 18
ACQUIRED DISPOSED	ACQUIRED DISPOSED
NAME OF BUSINESS ENTITY	NAME OF BUSINESS ENTITY
GENERAL DESCRIPTION OF THIS BUSINESS	GENERAL DESCRIPTION OF THIS BUSINESS
FAID MADIET VALUE	FAID MADIST VALUE
FAIR MARKET VALUE  \$\int\\$2,000 - \\$10,000	FAIR MARKET VALUE
\$2,000 - \$10,000 \$10,001 - \$100,000 \$10,001 - \$100,000	\$2,000 - \$10,000 \$10,000 - \$100,000 Over \$1,000,000
NATURE OF INVESTMENT	NATURE OF INVESTMENT
Stock Other	NATURE OF INVESTMENT  Stock Other
(Describe)	(Describe)
Partnership O Income Received of \$0 - \$499 Income Received of \$500 or More (Report on Schedule C)	Partnership O Income Received of \$0 - \$499 O Income Received of \$500 or More (Report on Schedule C,
IF APPLICABLE, LIST DATE:	IF APPLICABLE, LIST DATE:
, , 10	/ / 18 / / 18
/	ACQUIRED DISPOSED